								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003								10603809					
		CLAIMS AS	CHA										
(Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			15					TE	FEE	1.	RATE	FEE	
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20=		*		X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			√ minus 3 =		•		X42=		OR	X84=	34		
Μl	JLTIPLE DEPEN	DENT CLAIM PI	RESENT				+140=		1		DI		
* If the difference in column 1 is less than zero, enter "0" in column 2								rat		OR	+280=	83 Y	
THAM CLAIMS AS AMENDED - PART II								·		OR	TOTAL		
7-28-05 (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER		HIGH NUMI PREVIO	BER	PRESENT EXTRA	RA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
		AMENDMENT		PAID		EXINA	_			-		FEE	
	Total	. 15	Minus	- a	O_{μ}	=0	X\$	9=	$Y \setminus /$	OR	X\$18=\		
	Independent + 4		Minus ***		4	0	X4	2=		ŌĘ.	X84=		
L	FIRST PRESE	NTATION OF ME	JLTIPLE DEPENDENT		CLAIM _		+14	n-	/	OA	+280=		
						. •	L	DTAL	/		TOTAL	1	
(Column 1) (Column 2) (Column 3)								FÉE	L	OR	ADDIT. FEE		
<u></u>		CLAIMS		HIGH	EST			-	ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	RA*	RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=	1.22	OR	X\$18=		
	Independent	•	Minus	***		=	X42	2=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
								0=		OR	+280=		
1							ADDIT.	FEE		OR	TOTAL ADDIT, FEE		
_		(Column 1) CLAIMS		(Colun		(Column 3)							
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$!)=	7 1	OR	X\$18=	FEE	
	Independent		Minus	***		=	X42			- 1	X84=		
2	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_		OR ·	A64=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the entry in column 1 is less than the entry in column 2, write to in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Murr	iber Previously Pai	d For (Total n	r Indonanda	antl is the	highest number	found in th	00 300	voorista ho	in anti	umn 1		

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*U.S. Government Printing Office: 2003 — 498-278/69151

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